

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2001

Application or Docket Number

10/083470  
43496

CLAIMS AS FILED - PART I

TOTAL CLAIMS		(Column 1)	(Column 2)
FOR		NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	20	20 minus 20 =	0
INDEPENDENT CLAIMS	3	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A		(Column 1)	(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 23	Minus	20	3
Independent	• 3	Minus	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT B		(Column 1)	(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 23	Minus	23	0
Independent	• 3	Minus	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT C		(Column 1)	(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 1	Minus	0	0
Independent	• 1	Minus	0	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20."  
\*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3."  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	FEES	RATE	FEES
BASIC FEE	370.00	OR	BASIC FEE 740.00
X\$ 9=		OR	X\$18=
X42=		OR	X84=
+140=		OR	+280=
TOTAL		OR	TOTAL 740

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18= 54
X42=		OR	X84=
+140=		OR	+280=
TOTAL ADDT. FEE		OR	TOTAL 54

AMENDMENT B		(Column 1)	(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 23	Minus	23	0
Independent	• 3	Minus	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT C		(Column 1)	(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 1	Minus	0	0
Independent	• 1	Minus	0	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

Form PTO-623 (Rev. 6/91) 10/083470-43496  
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